ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	J.B.	202205 49	9/3/99
O.I.P.E. CLASSIFIER		21423	9-9-99
FORMALITY REVIEW	BW OW	21423	10-15-99

INDEX OF CLAIMS

✔	.... Rejected	N .... Non-elected
=	.... Allowed	I .... Interference
−	(Through numeral) Canceled	A .... Appeal
÷	.... Restricted	O .... Objected

Claim		Date						Claim		Date						Claim		Date					
Final	Original							Final	Original							Final	Original							
	1								51								110							
	2								52								112							
	3								53								113							
	4								54								114							
	5								55								115							
	6								56								116							
	7								57								117							
	8								58								118							
	9								59								119							
	10								60								110							
	11								61								111							
	12								62								112							
	13								63								113							
	14								64								114							
	15								65								115							
	16								66								116							
	17								67								117							
	18								68								118							
	19								69								119							
	20								70								120							
	21								71								121							
	22								72								122							
	23								73								123							
	24								74								124							
	25								75								125							
	26								76								126							
	27								77								127							
	28								78								128							
	29								79								129							
	30								70								130							
	31								81								131							
	32								82								132							
	33								83								133							
	34								84								134							
	35								85								135							
	36								86								136							
	37								87								137							
	38								88								138							
	39								89								139							
	40								90								140							
	41								91								141							
	42								92								142							
	43								93								143							
	44								94								144							
	45								95								145							
	46								96								146							
	47								97								147							
	48								98								148							
	49								99								149							
	50								100								150							

If more than 150 claims or 10 actions
staple additional sheet here

(LEFT INSIDE)